Date of Deposit:

# **Application Data Sheet**

## **Application Information**

Application Type::	
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	·
CD-ROM or CD-R?::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission?::	
Computer Readable Form	
(CRF)?::	
Number of copies of CRF::	
Title::	Sperm-Specific Cation Channel, CatSper2, and
	Uses Therefor
Attorney Docket Number::	110313.136US
Request for Early Publication?::	No
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	
Latin name::	
Variety Denomination Name::	
Petition Included?::	
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	

Date of Deposit:

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: China

Status:: Full Capacity

Given Name:: Dejian

Middle Name::

Family Name:: Ren

Name Suffix::

City of Residence:: Wynnewood

State or Province of Residence:: Pennsylvania

Country of Residence:: USA

Street of mailing address:: 937 Clover Hill Road

City of mailing address:: Wynnewood

State or Province of mailing

address:: PA

Country of mailing address:: USA

Postal or Zip Code of mailing

address:: 19096

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Middle Name:: E.

Family Name:: Clapham

Name Suffix::

City of Residence:: Wellesley

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Date of Deposit:

State or Province of Residence::

Massachusetts

Country of Residence::

US

Street of mailing address::

3 Atwood Street

City of mailing address::

Wellesley

State or Province of mailing

address::

MA

Country of mailing address::

US

Postal or Zip Code of mailing

address::

02482

**Applicant Authority Type::** 

Inventor

**Primary Citizenship Country::** 

US

Status::

Full Capacity

Given Name::

David

Middle Name::

L.

Family Name::

Garbers

Name Suffix::

City of Residence::

Denton

State or Province of Residence::

Texas

Country of Residence::

US

Street of mailing address::

3826 Waterford Way

City of mailing address::

Denton

State or Province of mailing

address::

TX

Country of mailing address::

US

Postal or Zip Code of mailing

address::

76210

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BOSTON 1893605v1

Date of Deposit:

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Timothy

Middle Name:: A.

Family Name:: Quill

Name Suffix::

City of Residence:: Grapevine

State or Province of Residence:: Texas

Country of Residence:: US

Street of mailing address:: 1809 Haydenbend Circle

City of mailing address:: Grapevine

State or Province of mailing

address:: TX

Country of mailing address:: US

Postal or Zip Code of mailing

address:: 76051

#### **Correspondence Information**

Correspondence Customer

Number:: 23483

Phone number:: (617) 526-6000

Fax Number:: (617) 526-5000

E-Mail address::

Date of Deposit:

#### **Representative Information**

Representative Customer

Number::

23483

### **Domestic Priority Information**

Application	Continuity Type::	Parent	Parent Filing
<b>::</b>		Application::	Date::
This Application	Continuation of	PCT/US02/33676	10/22/02
PCT/US02/33676	An application claiming the benefit under 35 USC 119(e)	60/345,324	10/22/01
			11

#### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
		11	
		11	

### **Assignment Information**

Assignee name::

Children's Medical Center Corporation

Street of mailing address::

300 Longwood Avenue

City of mailing address::

**Boston** 

State or Province of mailing

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BOSTON 1893605v1

Date of Deposit:

address:: Massachusetts

Country of mailing address:: USA

Postal or Zip Code of mailing

address:: 02115

Assignee name:: Board of Regents, The University of Texas System

Street of mailing address:: 201 West Seventh Street

City of mailing address:: Austin

State or Province of mailing

address:: Texas

Country of mailing address:: USA

Postal or Zip Code of mailing

address:: 78701